


## SALESPERSON LICENSE APPLICATION

Check One: ☐ 2570 Original Application ☐ 2571 Renewal (Skip questions 15- 16, answer questions 17 & 18) ☐ 2572 Additional Licenses

PERSONAL INFORMATION				
1. Name (last, first & middle)		2. Social Security Number		3. Date of Birth
4. Home Address		5. City	6. State	7. ZIP
8. Home Phone				
9. If a resident of Colorado less than two years, list prior address			10. City	11. State
12. Colorado Driver's License Number or Colorado ID Number				Expiration Date
13. List any and all names, (aliases, maiden name, nicknames, etc).				
14. Please review the Department of Revenue Web site at <a href="http://www.revenue.state.co.us">www.revenue.state.co.us</a> in order to understand what constitutes "Proof of Lawful Presence". This is to certify that the Dealership, acting as the third party agent for the Department of Revenue, has obtained an affidavit stating that the applicant is a US Citizen, Legal Permanent Resident or is otherwise lawfully present in the United States pursuant to federal and state law. <input type="checkbox"/> Yes <input type="checkbox"/> No To obtain a copy of the required affidavit go to <a href="http://www.mv.state.co.us/dlr/dealer.html">www.mv.state.co.us/dlr/dealer.html</a>				
15. Have you ever been licensed as a salesperson in Colorado. If yes, provide license number				
Date From/To	Employer	Address		State
				Position
BACKGROUND INFORMATION				
16. In the past 10 years have you ever been arrested, charged with, convicted of or pled no contest to any felony or misdemeanor or crime, excluding traffic violations? If "Yes" give full details including: type (felony/misdemeanor), charges offense details, date and location of conviction, sentence received, current status (release, probation, parole), etc. Please attach additional pages if needed and have employer sign all pages. <input type="checkbox"/> Yes <input type="checkbox"/> No				
DATE	CITY, COUNTY, STATE	OFFENSE	SENTENCE	STATUS
17. In the past 10 years have you had any professional or occupation license, including a dealer or salesperson, denied or subjected to disciplinary action, such as suspension, revocation, probation, fine, etc? If you answered "Yes", provide the following information. <input type="checkbox"/> Yes <input type="checkbox"/> No				
Date	State	Nature of Violation/Charge	License Occupation	Disposition
18. In the past twelve (12) months have you been charged with, convicted of or pled no contest to any felony or misdemeanor crime? (For license RENEWAL only) <input type="checkbox"/> Yes <input type="checkbox"/> No				
 <b>NOTE: A criminal background check is conducted on applicants. Failure to disclose a charge, conviction or pleas is a material misstatement and is grounds for denial of the license.</b>				
APPLICANT'S STATEMENT OF UNDERSTANDING				
I declare under penalty of perjury in the second degree that I have read the application and the statements made on this application are true and complete to the best of my knowledge. Any false answer or statement made constitutes second degree perjury. I hereby appoint the Executive Secretary of the Motor Vehicle Dealer Board my true and lawful agent for the service of process in accordance with 12-6-115(6) C.R.S. I hereby authorize the release to board agents of any and all records pertaining to my employment and criminal background. I understand that if my application is incomplete that it will be rejected and no license will be issued.				
Signature				Date
EMPLOYING DEALER'S CERTIFICATION AND UNDERSTANDING				
19. Salesperson Bond Number		20. Bond Company Name		21. This Certifies the above named applicant has passed the Mastery Licensing Exam with a 100% DLR <input type="checkbox"/> CADA <input type="checkbox"/> CIADA <input type="checkbox"/>
I declare under penalty of perjury in the second degree:				
<ul style="list-style-type: none"><li>A copy of the sales person's identification provided as proof of lawful presence will be sent to the Auto Industry Division upon completion.</li><li>The original signed bond is retained by the dealership and will be available for inspection.</li><li>A signed Affidavit form DR 4679 will be signed and a copy will be sent to the Auto Industry Division upon completion.</li></ul>				
22. Dealer License Name/DBA			23. Dealer's License No.	24. Business Phone
25. Address				
Signature (dealer owner, corporate officer, LLC manager, or general manager)			Printed Name	Title <input type="checkbox"/> Owner <input type="checkbox"/> Corporate Officer <input type="checkbox"/> LLC Mgr. <input type="checkbox"/> General Manager
FOR OFFICE USE ONLY		Data Entry & Date	Criminal History Check	Board Approval & Date
				Fee Submitted \$